



Billing Timelines & Appeal Procedures

Timelines

30 Days – Usual turnaround time for both electronic (EDI) and paper claims.

60 Days – Usual turnaround time for Medicare/MassHealth crossover claims forwarded to MassHealth by the Massachusetts Medicare fiscal agent.

90 Days – Original claims must be received by MassHealth within 90 days of the service date. If you had to bill another insurance prior to billing MassHealth, you have 90 days from the date of the explanation of benefits (EOB) of the primary insurer to submit your claim.

12 Months – Final submission deadline. You have 12 months from the date of service to resolve your claim, provided that you originally submitted the claim within 90 days from the date of service. If you exceed this deadline, your claim will be denied for error code 888 “Final Deadline Exceeded” on a paper remittance advice (RA) or “1” on the 835 electronic RA.

18 Months – This is the final submission deadline if you had to bill another insurance carrier prior to billing MassHealth. After the initial 90 days from the EOB date, you have 18 months from the service date to resolve your claim. If you exceed this deadline, your claim will be denied for error code 888 “Final Deadline Exceeded” on a paper remittance advice (RA) or “1” on the 835 electronic RA.

Final Deadline Exceeded Appeal Procedures

To be eligible for appeal your claim must have been denied for error code 888 - “Final Deadline Exceeded or “1” on the 835.” The appeal must be filed within 30 days of the date of the remittance advice on which your claim FIRST denied with error code 888 or “1” on the 835. In order for your appeal to be approved, you must demonstrate that the error that prevented your claim from processing correctly within the applicable filing time limit was the result of MassHealth error.

If you wish to file an appeal, send a cover letter, a corrected claim form, all the remittance advices it has appeared on (including the “888” denial) and any other supporting documentation and a cover letter to:

MassHealth
Final Deadline Appeals Unit
600 Washington Street
Boston, MA 02111.

You can inquire on the status of your appeal request by sending an e-mail to:

fdeappeals@state.ma.us or by calling: 617-210-5538.

Error 837 – “Date of Service Exceeds 36 Months.” If you exceed this timeline your claim will be “DENIED” for error 837 “Date of Service Exceeds 36 Months” on a paper RA or “1” on the 835 electronic RA. A claim with this error cannot be appealed.